(b) Under the National Cancer Control programme the following schemes are implemented for providing facilities for awareness, early detection and treatment of cancer patients in the country;

1. Grants to Regional Cancer Centres
2. Assistance for development of Oncology Wing in Government Medical Colleges.
3. Assistance for Cobalt Unit at Govt. Institutions/Registered Chariatable Organisations.
4. Assistance for District Cancer Control Prgramme.
5. Assistance to NGOs for Health Education and Early Detection Activities.

Involving NGOS in HIV/TB Programmes

3722. SHRIMATI AMBIKA SONI:
MISS FRIDA TOPNO:
MISS MABEL REBELLO:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have proposals to involve NGOs in eradicating the HIV and multi-drug resistant TB;

(b) if so, the steps being taken to encourage and support NGOs for creating awareness about these diseases among the public and the provision of diagnostic facilities, particularly for the poor and economically vulnerable section of society; and

(c) the details of external assistance needed for the purpose?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) and (b) Yes, Sir. In so far as HIV/AIDS is concerned, NGOs have been involved in prevention and care programmes. They are important partners in the Targetted Intervention in the States for vulnerable groups such as commercial sex workers, truck drivers, migrant labourers, street children, intravenous drug users, etc. They are also being involved in social mobilization programmes and in, providing low cost care to the people living with HIV/AIDS.

As far as multi drug resistant TB is concerned, national Tuberculosis Control Programme encourages involvement of NGOs, private and charitable organisations private providers at various levels. Some NGOs like Mahavir Hospital in Hyderabad, SEWA in Ahmedabad and R.K. Mission in Delhi etc., are helping in imple meeting Revised National TB Control Programme (RNTCP). For wider involvementof NGOs approved policy for their involvement in the RNTCP has been widely circulated.

In the policy for NGO involvement, five schemes have been devised for involvement of NGOs in the RNTCP as under:

Scheme 1:

Includes health education and community outreach in which commodity assistance in the form of literature, etc. and grant-in-aid for covering training and incidental charges has been proposed to be given.

Scheme 2:

The NGOs provide Directly Observed Treatment to patients.The suppor will be in the form of commodity assistance and grant-in-aid which include Rs. 175 to the individual volunteer for each cured patient as well a reimbursement of incidental charges.

Scheme 3:

In-hospital care for tuberculosis. The hospital will follow RNTCP polic and will be given both commodity assistance and grant-in-aid.

Scheme 4:

Microscopy and treatment centre. The NGO is designated as a Microscop and Treatment Centre for the defined population. The commodity assistance will include laboratory consumables and cash assistance for civil works, gran in-aid and will also include incidental charges, transportation, etc.

Scheme 5:

Tuberculosis Unit Model. the NGO will cover approximately 5 lak population and will have up to five microscopy centres. Commodity assistanc will include anti-TB drugs, microscopes and laboratory consumables, et Mobility of the Senior TB Supervisor (STS) and Senior TB Laborato Supervisor (STLS) will also be taken care of. The grant-in-aid will inclu funds for training as well as for civil works, etc.

(c) As far as HIV eradication is concerned, the NGO activities are mainly decentralized to State/UT-run AIDS Control Society set up in each and every State/UT. The budgetary provisions for external assistance during 2000-2001 are to the tune of Rs. 143.50 crores of which Rs. 2.50 crore is under Central Sector. The remaining provision are in State Sector.

As far as multi drug resistant TB is concerned, under the World Bank assisted Revised National TB Control Programme there is a provision of Rs. 6.78 crores for involvement of NGOs in different aspects of the Revised Strategy.

Medicines for Tuberculosis

†3723. SHRI SWARAJ KAUSHAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact the maximum number of Tuberculosis patients die in India due to the very costly medicines for curing tuberculosis;

(b) if so, the year-wise number of tuberculosis patients who died in 1998-99 and 1999-2000;

(c) whether Government have formulated any scheme to provide medicines for curing tuberculosis at cheaper rates; and

(d) if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) to (d) Anti-TB drugs are provided free of cost to "patients throughout the country. Under the World Bank assisted Revised National TB Control Programme, anti-TB drugs, are provided in kind for (i) all patients in RNTCP districts and (ii) for sputum positive cases in all other districts. Under NTCP cash assistance is provided to states for 100% requirement of anti-TB drugs for sputum negative cases in non-RNTCP districts by Government of India. Deaths are not being reported under the National TB Control Programme. It is estimated that nearly 0.5 million people die due to TB every year in the country.

Reference of Cases by AIIMS

3724. SHRI AMAR SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that a number of patients are sent almost daily for admission in Safdarjung Hospital by the doctors of AIIMS;

†Original Notice of the Question was received in Hindi.